## 16235 U.S. PTO 10/723073

UTILITY	Attorney Docket No.: S-100,587					
PATENT APPLICATION	tor or Application Identifier: Don M. Coates					
TRANSMITTAL		IDENTIFICATION CODING SCHEMES FOR MODULATED REFLECTANCE				
IRANSIVITIAL		/STEMS press Mail Label No.: ET461825705US				
	Express IVI	an Laber No.: 2140102070000				
APPLICATION ELEMENTS	AD	DRESS TO: Commissioner for Patents  Mail Stop Patent Application PO Box 1450  Alexandria, VA 22313-1450				
1. ☑ * Fee Transmittal Form (e.g. PTO/SB/17)	6.	CD-ROM or CD-R in duplicate, large table or				
(submit an original and a duplicate for fee processing)		Computer Program (Appendix)				
<ol> <li>Applicant claims small entity status.</li> <li>See 37 CFR 1.27.</li> </ol>		7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)				
3. ⊠ Specification [ Total Pages: 18		a. Description of the Computer Readable Copy Description Sequence Listing on:				
Descriptive title of the Invention	'   `	i. CD-ROM or CD-R (2 copies): or				
Cross References to Related Applicat		ii. paper				
Statement Regarding Fed sponsored	nau	c. Statement verifying identity of above copies				
<ul> <li>Reference to sequence listing, a table or a computer program listing append</li> </ul>		ACCOMPANYING APPLICATION PARTS				
□ Background of the Invention	8.	■ Assignment Papers (cover sheet & documentation)				
<ul><li>Brief Description of the Drawings (if file</li><li>Detailed Description</li></ul>	ea)   9.	☐ 37 C.F.R.§3.73(b) Statement ☐ Power of				
☐ Claim(s)		(when there is an assignee) Attorney				
Abstract of the Disclosure	10	. 🛛 Information Disclosure 🖾 Copies of IDS				
4. Drawings(s) (35 U.S.C.113)[Total Sheets: 7	1	Statement (IDS)/PTO-1449 Citations				
☐ Formal ☐ Informal	<sup>*</sup>   11	.   Preliminary Amendment				
5. ☑ Declaration & Power of Attorney  [Total Pages: 2]	] 12	12. Return Receipt Postcard (MPEP 503)  (should be specifically itemized)				
<ul> <li>a. Newly executed (original or copy)</li> <li>b. Copy from a prior application (37 C.F.R§.63(d) (for continuation/divisional with Box 16 completed)</li> <li>c. DELETION OF INVENTOR(S)  Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33 (b).</li> </ul>		Certified Copy of Priority Document(s)				
		(if foreign priority is claimed)				
		. Nonpublication Request and Certification Under 35 U.S.C.				
		122(b)(2)(b)(i)				
		. Other:				
		supply the requisite information below and in a preliminary amendment:				
☐ Continuation ☐ Divisional ☐ Continuat						
Prior application information: Examiner:		Group/Art Unit:				
		•				
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
16. C	ORRESP	ONDENCE ADDRESS				
		OR Correspondence Address Below				
05000						
35068		Allerto Dee On to Label hours				
(Insert Customer No. or Attach Bar Code Label here)						
Name: Milton D. Wyrick						
Address: Los Alamos National Laboratory, LC/IP, MS A187						
City: Los Alamos State: New Mexico Zip Code: 87545 Country: United Stat s Telephone: (505) 665-3659 Fax: (505) 665-4424						
Name: Milton D. Wyrick Registration No.: 29,993						
Signature: Milly Signature Date: 25 November 2003						

## FEE TRANSMITTAL For FY 2004

Patent fees are subject to annual revision (submit an original and a duplicate for fee processing)

Complete if Known					
Application Number:					
Filing Date:					
First Named Inventor:	Don M. Coates et al.				
Examiner Name:					
Group/Art Unit:					
Attorney Docket No.:	S-100 587				

	Docket No.:   S-100,587					
METHOD OF PAYMENT	METHOD OF PAYMENT FEE CALCULATION (continued)					
The commissioner is hereby authorized to charge indicated fees and credit any over payments to:     Deposit Account Number: 12-2150     Deposit Account Name: Los Alamos National Laboratory     Charge Any Additional Fee Required Under 37 C.F.R. 1.16 and 1.17	3. ADD Large Entity Fee	ITIONAL F Small Entity Fee	EES Fee Description	Fee Paid		
Applicant claims small entity status.	\$130	\$65	Surcharge – late filing fee or oath			
See 37 CFR 1.27	\$50	\$25	Surcharge – late provisional filing fee or cover sh	neet		
FEE CALCULATION	\$2,520	20 \$2,520 For filing a request for reexamination				
		\$55	Extension for reply within first month			
BASIC FILING FEE  Large Entity Small Entity	\$420	\$210	Extension for reply within second month			
	\$950	\$475	Extension for reply within third month	within third month		
Fee Fee Fee Description Fee Paid \$770 \$385 Utility filing fee	\$1,480	\$740	Extension for reply within fourth month			
\$770 \$385 Reissue filing fee	\$2,010	\$1,005	1,005 Extension for reply within fifth month			
\$160 \$80 Provisional filing fee	\$330	· \$165	Notice of Appeal			
SUBTOTAL (1) \$385.00	\$330	\$165	Filing a brief in support of an appeal			
	\$290	\$145	Request for oral hearing			
		\$55	Petition to revive – unavoidable			
	\$110	\$55	Terminal Disclaimer			
	\$1,330	\$665	Petition to revive - unintentional			
•	\$130	\$130	Petitions to the Commissioner			
O EVERA OLAMA EEEO		\$50	etitions related to provisional applications			
2. EXTRA CLAIM FEES  Extra Fee from Fee Paid  Claims Below  Total Claims 18 -20** = X -0- = -0-  Independent 1 -3 ** = X -0- = -0-	\$ 180	\$180	ubmission of Information Disclosure Statement			
	\$770	\$385	Filing a submission after final rejection (37 CFR 1.129 (a))			
Claims Multiple Dependent =	\$770	\$385	For each additional invention to be examined (37 CFR 1.129(b))			
** or number previously paid, if greater; For Reissues, see below	\$100	\$100	Certificate of Correction			
Large Small   Entity	\$300	\$300	Publication fee for early, voluntary, or normal publication			
\$18 \$9 Claims in excess of 20 \$86 \$43 Independent claims in excess of 3	\$770	\$385	Request for Continued Examination (RCE)			
\$290 \$145 Multiple dependent claim, if not paid. \$86 \$43 ** Reissue independent claims	Other fe	Other fee (specify)				
over original patent \$18 \$9 ** Reissue claims in excess of 20			SUBTOTAL (3)	\$-0-		
and over original patent		Reduced by Basic Filing Fee Paid				
SUBTOTAL (2) \$-0-			SUBTOTAL FROM 1 SUBTOTAL FROM 2 SUBTOTAL FROM 3	\$385 \$-0- \$-0-		
			TOTAL AMOUNT OF PAYMENT	\$385		

SUBMITTED BY			Comp	Complete (if applicable)	
Printed Name:	Milton D. Wyrick		Reg. No.	29,993	
Signature:	Mitta & Sprik	Date: 25NN 03	Telephone	(505) 665-3659	